

Office of the City Clerk 491 East Pioneer Avenue

491 East Pioneer Avenue Homer, Alaska 99603

clerk@cityofhomer-ak.gov (p) 907-235-3130 (f) 907-235-3143

PUBLIC RECORDS REQUEST FORM

Name:	Phone:	Cell:
Name of Business, Law Firm and/or Compa	ny:	
Address:	City:	State:Zip:
Email:		Fax:
The requested public record is strictly for:		
☐ My own personal use.	□On behalf of:	
I would like the documents delivered to me	by:	
☐ Mail (address listed above) ☐ Fax (listed	d above) 🗖 Email(listed above) 🗖 Will Pick	Up 🗖 For Review Only
I certify that I am not involved in litigation, in a judicial or administrative forum, nor am I acting on behalf of or otherwise representing any party who is involved in litigation with the City of Homer to which the requested record is relevant. <i>Initial</i>		
transmission. I further understand that if i	t is determined that my request (s) will req	st to be copied or provided by electronic quire more than five hours of staff time per lired to complete the search and/or copying Initial
Requesto	r's Signature Documents Requested	
Identify and describe the documents you seek. Be specific.		
•		
Department/City Manager Signature:		Date:
☐ Approved ☐ Denied – reason for der		

Public Records and the Law

Information on Alaska's Public Records Laws can be found in Alaska Statues 9.25-100–220, and in Homer City Code 2.84. Exceptions to the policy that a city document should be released to the public when there is a request can be found in Alaska Statutes 9.25.120 and Homer City Code 2.84.020